the findings of Monckeberg (Untersuchungen uber das Otrio-ventrikular bundel in menschlichen Herzen, 1909), who has studied in a similar manner 70 hearts. In accord with the observations of Monckeberg is the observation that the His bundle does not hypertrophy with hypertrophy of the remainder of the heart muscle. The demonstration that acute lesions are of common occurrence postmortem indicates that terminal alterations in the conducting system of the heart may occasionally be responsible for death in certain instances. With careful study by the phlebogram and electrocardiogram some of these cases may be recognized before death.

Subcutaneous Reaction of Rabbit and Horse Serum.—KNOX and MOSS (*Jour. Exper. Med.*, 1910, xii, 562) have found that anaphylaxis or allergy of rabbits against horse serum can be proved by the subcutaneous test. This is made by the injection of small amounts of horse serum beneath the shaved skin of the abdomen of sensitized rabbits. The specific reaction appears in from twelve to twenty-four hours after the test is made, and reaches its maximum in from twenty-four to thirty-six hours. It consists of a local swelling extending from 0.5 to 2 cm. from the point of inoculation. The skin involved in the raised area is usually red, and hotter than the surrounding skin. The hypersusceptibility sets in usually in from ten to fifteen days after the first injection of horse serum and lasts at least three months, though individual rabbits showed variations from the average time. Almost synchronously with the allergic conditions, precipitins against horse serum appear in the rabbit's blood. No suppression of allergy which would correspond to the so-called antianaphylaxis could be proved, and after large injections of serum the allergic rabbits still reacted subcutaneously. The allergic condition was not transmitted to the young, for the offspring of injected rabbits did not give a positive subcutaneous test. Neither the injection of large amounts of horse serum nor the marked local reaction of the skin produced any variation in the leukocytes greater than may be observed in normal rabbits.

Acute Degeneration of the Liver in Animals with an Eck Fistula Complicated with Pancreas Necrosis.—During some experiments with an Eck fistula in dogs, FISHLER (*Deut. Arch. f. klin. Med.*, 1910, c, 329) found that if the pancreas was injured a train of well defined symptoms developed, ending in death. These symptoms consisted principally in coma, with sensory and motor excitability. At autopsy the most striking pathological changes were extensive central necrosis of the liver, with a few fat necroses about the pancreas. Neither the symptoms nor anatomical changes can be brought about by Eck fistulas alone. On the other hand, extensive injury to the pancreas results in slight changes in the liver, perhaps similar in kind, but not to be compared in extent with those following the combination of an Eck fistula and injury to the pancreas. These liver changes have been noted frequently in pancreas necrosis, and Fischler believes them to be of much importance and caused by the action of the pancreas ferments upon the liver cells. When the blood supply of the liver is interfered with by shunting off the portal circulation into the vena cava, the function of the liver is disturbed and the action of even small amounts of pancreatic ferments is greatly exaggerated, resulting in the extensive destruction of the lobules, accompanied by coma and death. The clinical feature is not unlike that seen in acute yellow atrophy. Fischler likewise believes that these experiments point to the fact that under normal circumstances the liver possesses an hitherto unrecognized function of destroying ferments. When this power is disturbed the ferments, for instance, of the pancreas, are not dispensed with, and therefore exert their toxic action upon the body. He offers this as an explanation for the death which occurs in extensive pancreatic necrosis.

The Pressor Substance of the Kidneys.—In an earlier communication Bingel and Strauss (*Deut. Arch. f. klin. Med.*, 1909, xcvi, 476) found that it was possible to extract from normal kidneys of various animals a substance which was capable of producing a marked and fairly prolonged rise in blood pressure when injected into rabbits and dogs. This substance had been studied further by Bingel and Claus (*Deut. Arch. f. klin. Med.*, 1910, c, 412). They find that this rise of blood pressure is probably brought about by a contraction of the peripheral vessels. Intravenous injections of rennin preparations were made in rabbits with oncometers placed upon the kidney and extremity. The injection of rennin was accompanied by a marked increase in the volume of the kidney, accompanied by diuresis and constriction of the vessels of the legs, which went hand in hand with the rise of blood pressure. This result is entirely different from that following the injection of adrenalin, which causes a great decrease in the volume of the kidney, an immediate decrease in the volume of the extremity, followed by an increase in the volume caused probably through the fact that blood is forced into the contracted vessels of the limbs through the high blood pressure. Finally, the limb decreases in volume again and the vessels remain contracted for some period of time. The action of rennin was then tried upon animals with experimentally induced nephritis. Sublimate was used for this purpose. Both the kidney volume and blood pressure of these nephritic animals reacted in exactly the same way as they did in normal animals. Finally, an extract of kidney from rabbits suffering from sublimate nephritis was compared with rennin from normal rabbits' kidneys. The extract of these kidneys, which were the seat of sublimate nephritis, gave rise to an entirely different reaction in the normal rabbit. Injections of the pressed juice of the kidney caused little or no effect upon the blood pressure and produced a marked decrease in the kidney volume. Since control experiments showed that this was not due to the presence of sublimate in the kidneys, the authors conclude that in sublimate nephritis the kidneys contain some substance which alters profoundly the normal action of kidney extract.

Notice to Contributors.—All communications intended for insertion in the Original Department of this Journal are received only *with the distinct understanding that they are contributed exclusively to this* Journal.

Contributions from abroad written in a foreign language, if on examination they are found desirable for this Journal, will be translated at its expense.

A limited number of reprints in pamphlet form, if desired, will be furnished to authors, *provided the request for them be written on the manuscript.*

All communications should be addressed to—

Dr. A. O. J. Kelly, 1911 Pine Street, Philadelphia, U. S. A.